



# TB CARE I

## Objective

TBCARE I Kenya aims to maintain gains and quality of TB control in Kenya. As well TBCARE works to expand access through improved Tuberculosis (TB) care and treatment and management of drug resistant TB (PMDT), TB/HIV care and treatment and health systems strengthening.

## Project status

TBCARE I Kenya is a cooperative agreement running from October 2010 to September 2015. The project is part of a global partnership, the TBCTA, comprising: KNCV TB foundation, Family Health International, JATA, CDC, ATS, MSH, WHO and the UNION. Four of these TBCTA partners namely KNCV, ATS, MSH and FHI are actively involved in the Kenya project. The project works with 3 local implementing partners, the ministry of public health and sanitations (MOPHS) through the division of leprosy, TB and Lung disease (DLTLD), Kenya AIDS NGOs Consortium (KANCO) and Kenya Association for the Prevention of TB and Lung Disease (KAPTLD).

## Key activities

TBCARE I Kenya implements activities to increase service access and use and improve quality while maintaining and improving the gains that have been achieved so far. The projects key technical areas are:

- Universal and Early Access to TB treatment with a focus on most-at-risk populations, engaging patients and all health providers
- Improving the TB lab network to address policy development, management, supervision and External Quality Assurance (EQA) systems for smear microscopy, C/DST and new technologies.
- Provide universal access to DST for DR-TB suspects and treatment to all those with MDR-TB
- Increase early case detection, expand intensified case finding and expand access to and integrate treatment of TB and HIV in co-infected persons
- Contribute to health system strengthening by improving political commitment, strengthening

human resources, enhancing health information and surveillance systems

## Achievements

TBCARE I is working closely with its implementing partners DLTLD, KANCO and KAPTLD to achieve its goals. TBCARE I offered critical support to the DLTLD to ensure smooth transition from TBCAP to TBCARE I. The other implementing partners have been engaged and started rolling out activities towards the end of this quarter. The following have been achieved:

- In Oct - Dec 2010, a total of **25682** TB patients were notified
- Draft guidelines to mainstream poverty & gender in TB control developed.
- **1030** AFB labs (**74%**) participated in EQA with an average error rate **11.6%**
- A total of **3079** samples from MDR suspects have been sent for culture and DST
- **72** MDR TB patients on treatment
- In October - December 2010- **55.4%** of scheduled support supervisions at district level were done
- **12** regional Quarterly progress review meetings were held
- 7 staff attended the Union conference in Berlin where they made one oral and nine poster presentations
- An electronic TB surveillance system has been initiated and a Technical Working Group established to roll it out

## Contacts

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**UPDATED APRIL 2011**